

**Elementary and Secondary Act,
Title II, Part D – (Enhancing Education Through Technology)
CFDA#84.318
School Year 2005-2006**

Corp # _____
Superintendent _____
Corp. Name _____
Address _____
City _____ State ____ Zip ____

Indiana Department of Education
Office of Learning Resources
Room 229, State House
Indianapolis, IN 46204-2798

Title II, Part D Contact Person

Phone Number

Fax Number

E-mail Address

Were you the contact person for Title II D last year? ☐ Yes ☐ No

Your current position - check all that apply:

- ☐ Central Office Administrator ☐ Technology Director ☐ Federal Programs Coordinator
☐ Library Media Specialist ☐ Professional Development Coordinator ☐ Other

I certify that the school corporation can meet the assurances, and this submission is the official Title II, Part D Application.

Superintendent's Name (*Please Print*)

Date

Superintendent's Signature